

ASSISTANT COMMISSIONER FOR PATENTS
Washington, DC 20231

In re application of:
Serial No.:
Filed:
For:

Wolfgang FLEISHER and Karen REIMER
09/701,450
November 27, 2000

**PREPARATIONS FOR THE APPLICATION OF ANTI-INFLAMMATORY, ESPECIALLY
ANTISEPTIC AGENTS AND/OR AGENTS PROMOTING THE HEALING OF WOUNDS, TO
THE LOWER RESPIRATORY TRACT AND/OR THE EAR**

Sir:

Transmitted herewith is a Amendment in the above-identified application.

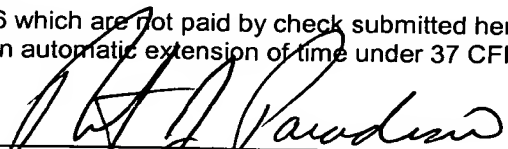
- ☐ Small entity status under 37 C.F.R. 1.9 and 1.27 has been previously established.
☐ Applicants assert small entity status under 37 C.F.R. 1.9 and 1.27.
☒ No fee for additional claims is required.
☐ A filing fee for additional claims calculated as shown below, is required:

| FOR: | (Col. 1) | (Col. 2) | | SMALL ENTITY | | OR | LARGE ENTITY | |
|--|------------|------------|---------|--------------|------------|----|--------------|------------|
| | REMAINING | HIGHEST | | RATE | FEE | | RATE | FEE |
| | AFTER | PREVIOUSLY | PRESENT | | | | | |
| | AMENDMENT | PAID FOR | EXTRA | | | | | |
| TOTAL CLAIMS | * Minus** | = | 0 | x \$ | 9 \$ | | x \$ | 18 \$ |
| INDEP. CLAIMS | * Minus*** | = | 0 | x \$ | 42 \$ | | x \$ | 84 \$ |
| <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM | | | | + | \$140 \$ | | + | \$280 \$ |

TOTAL: \$ OR TOTAL: \$

- * If the entry in Co. 1 is less than the entry in Col. 2, write "0" in Col. 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☒ Also transmitted herewith are:
☒ Petition for extension under 37 C.F.R. 1.136
☒ Other: Supplemental Information Disclosure Statement (3 pages);
 Form PTO 1449 with cited references (2 pages);
- ☒ Check(s) in the amount of **\$1,160.00** is/are attached to cover:
☐ Filing fee for additional claims under 37 C.F.R. 1.16
☒ Petition fee for extension under 37 C.F.R. 1.136
☒ Other: Information Disclosure Statement
- ☒ The Assistant Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0552.
- ☒ Any filing fee under 37 C.F.R. 1.16 for the presentation of additional claims which are not paid by check submitted herewith.
- ☒ Any patent application processing fees under 37 C.F.R. 1.17.
- ☒ Any petition fees for extension under 37 C.F.R. 1.136 which are not paid by check submitted herewith, and it is hereby requested that this be a petition for an automatic extension of time under 37 CFR 1.136.


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I hereby certify that this correspondence and/or documents referred to as attached therein and/or fee are being deposited with the United States Postal Service as "first class mail" in an envelope addressed to "Assistant Commissioner for Patents, Washington, D.C. 20231" on September 3, 2002


 DAVIDSON, DAVIDSON & KAPPEL, LLC

BY: Guendoline Decosta